Under the Paperwork Reduction Act of	to respond to a collection	respond to a collection of information unless it displays a valid OMB control number				
Effective on 12/08/	Complete if Known					
Fees pursuant to the Consolidated Approp			February 17, 19			
FEE TRANS	Filing Date		Frederick S.M. Herz			
For FY 20	First Named Inventor Frederick S.M. Examiner Name S. P. Huynh		1012			
CV		Art Unit 242				
X Applicant claims small entity status. See 37 CFR 1:27		ARLOIR		813.70013US01		
TOTAL AMOUNT OF PAYMENT	(\$) 825.00	Attorney Docket	No. 1 00	1.0010.10010		
METHOD OF PAYMENT (check all that apply)						
Check X Credit Card Money Order None Other (please identify):						
Deposit Account Deposit Account Number 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
Credit any overpayments fee(s) or underpayments of x Credit any overpayments						
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES						
F	ILING FEES S Small Entity	EARCH FEES Small Entity		Small Entity		
Application Type Fee ((\$) Fee (\$)	Fee (\$)	Fee (\$)	Fees P	aid (\$)
Utility 330	165 54	10 270	220	110		
Design 220	110 10	00 50	140	70		
Plant 220		30 165	170	85		
Reissue 330	165 5	10 270	650	325		
Provisional 220	110	0 0	0	0		Small Entity
2. EXCESS CLAIM FEES Fee (S						Fee (\$)
Fee Description Each claim over 20 (including Reissues)						26
Each independent claim over 3 (including Reissues)					220	110
Multiple dependent claims 390 195						
Total Claims Extra Clair	ns Fee (\$)	Fee Paid (\$)	Fee Paid (\$) Multiple Depen			
- 20 or HP	_ x = _		Fee (\$)		Fee Paid (\$	<u>5)</u>
HP = highest number of total claims paid t	for, if greater than 20.					_
Indep. Claims Extra Clair	ns Fee (\$)	Fee Paid (\$)				
- 3 or HP = HP = highest number of independent clair	ns paid for if greater than 3.					
A ARRIVONTION OFFEE						
and the sequence of computer of paper (excluding electronically filed sequence of computer						
If the specification and drawings exceed to specification size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
		and 37 CFR 1.16(8) ch additional 50 or fr	setion themof	Fee (\$)	Fee	Paid (\$)
Total Sheets Extra She		(round up to a w				
						Paid (\$)
and the state of t						
Non-English Specification, \$150 fee (no small clindy uscount) Other (e.g., late filling surcharge): 2253 Extension for response within third month 555.00 270.00						
2401 Notice of appear						
SUBMITTED BY		Registration No.	64.440	Telephone	617 64	6 8000
Signature Thomas A	Though A. Venein		(Attorney/Agent)		617.646.8000 August 10, 2010	
Name (Print/Type) Robert A. Jens	en/			Date	August '	10, 2010

Certificate of Electronic Filling Under 37 CFR 1.8

I hereby certify that this paper (along with any paper referred to as being stached or enclosed) is being transmitted via the Office electronic filling system in accordance with § 1.5(a)(4). Signature: Patricia L. Marchetti (Patricia L. Marchetti) Dated: August 10, 2010